Application Evaluation Criteria

Grant applications will be evaluated by an objective review committee according to the following:

- 1. Capability of the Applicant: applicant's demonstrated experience and qualifications to complete the project proposed and to perform a research or demonstration project.
- 2. Impact of Study Objective: (1) impact of the study on the advancement of rural EMS and trauma care delivery; (2) contribution of the study to existing knowledge on EMS and trauma care such that further work on the issue is a high priority; and (3) development of new methods rather than a duplication of methods previously implemented.
- 3. Selection of Rural Community: appropriateness of the rural area(s) where the project will be conducted and the adequacy of justification for inclusion of non-rural areas in the research or demonstration activity.
- 4. Community Participation: extent to which an applicant that is not located in the rural community where the research or demonstration activity will be conducted has established an equal partnership and coordinated project development activities with the rural constituency under study, including: the prehospital, acute care, and rehabilitation sectors; local medical control; concerned advocates; the State EMS Office; and other interested parties.
- 5. Study Design: appropriateness of study design to the stated hypothesis, and the likelihood that the proposed research activity will yield expected results and improve rural EMS and trauma care.
- 6. Methodology: appropriateness and adequacy of the work plan for completion of project activities and project evaluation, and of the schedule for organizing and completing the project within the project period.

Allowable Costs

The basis for determining the allowability and allocability of costs charged to PHS grants is set forth in 45 CFR Part 74, Subpart Q, and 45 CFR Part 92. The four separate sets of cost principles prescribed for recipients of grants for public and private nonprofit entities are: OMB Circular A–87 for State and local governments; OMB Circular A–21 for institutions of higher education; 45 CFR Part 74, Appendix E for hospitals; and OMB Circular A–122 for nonprofit organizations.

Reporting Requirements

A successful applicant under this notice will submit quarterly reports in accordance with provisions of the general regulations which apply under 45 CFR Part 74, Subpart J, Monitoring and Reporting of Program Performance, with the exception of State and local governments to which 45 CFR Part 92, Subpart C reporting requirements will apply.

Public Health System Impact Statement

This program is subject to the Public Health System Reporting Requirements. Reporting requirements have been approved by the Office of Management and Budget-0937-0195. Under these requirements, the community-based non-governmental applicant must prepare and submit a Public Health System Impact Statement (PHSIS). The PHSIS is intended to provide information to State and local health officials to keep them apprised of proposed health services grant applications by community-based nongovernmental organizations within their jurisdictions.

Community-based non-governmental applicants are required to submit the following information to the head of the appropriate State and local health agencies in the area(s) to be impacted no later than the Federal application receipt due date:

- a. A copy of the face page of the application (SF 424)
- b. A summary of the project PHSIS, not to exceed one page, which provides:
 - (1) A description of the population to be served,
 - (2) A summary of the services to be provided,
 - (3) A description of the coordination planned with the appropriate State or local health agencies.

PHS Smoke-free Policy

Public Law 103–227, the Pro-Children Act of 1994, prohibits smoking in certain facilities in which education, library, day care, regular and routine health care and early childhood development services are provided to children. Smoking must also be prohibited in indoor facilities that are constructed, operated or maintained with Federal funds.

Executive Order 12372

Grants awarded under this notice are subject to the provisions of Executive Order 12372, which sets up a system for State and local government review of proposed Federal assistance applications. Applicants (other than federally recognized Indian tribes) should contact their State Single Point of Contact (SPOC) as early as possible to alert them to the prospective applications and receive any necessary instructions on the State process. For

proposals serving more than one State, the applicant is advised to contact the SPOC of each affected State. A current list of SPOCS is included in the application kit. The SPOC has 60 days after the application deadline date to submit comments. The granting agency does not guarantee to "accommodate or explain" State recommendations received after that date.

The OMB Catalog of Federal Domestic Assistance Number for this program is 93.952.

Dated: Arpil 14, 1995.

Ciro V. Sumaya,

Administrator.

[FR Doc. 95–9756 Filed 4–19–95; 8:45 am] BILLING CODE 4160–15–P

Public Health Service

Indian Health Service; Indians Into Medicine Programs

AGENCY: Indian Health Service. **ACTION:** Notice of competitive grant applications for the Indians Into Medicine Program.

SUMMARY: The Indian Health Service (IHS) announces that competitive grant applications are being accepted for the Indians Into Medicine (INMED) Program established by section 114 of the Indian Health Care Improvement Act of 1976 (25 U.S.C. 1612), as amended by Public Law 102-573. There will be only one funding cycle during fiscal year (FY) 1995. This program is described at 93.970 in the catalog of Federal Domestic Assistance and is governed by regulations at 42 CFR 36.310 et seq. Costs will be determined in accordance with applicable OMB Circulars. Executive Order 12372 requiring intergovernmental review does not apply to this program.

The Public Health Service (PHS) is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a PHS-led activity for setting priority areas. This program announcement is related to the priority area of **Educational and Community-based** programs. Potential applicants may obtain a copy of Healthy People 2000 (Full Report; Stock No. 017-001-00474-0) or Healthy People 2000 (Summary Report; Stock No. 017–001–00473–1) through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402–9325 (Telephone 202-783-3238)

Smoke Free Workplace: The PHS strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products, and Public Law 103–227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, and early childhood development services are provided to children.

DATES: A. Application Receipt Date—An original and two (2) copies of the completed grant application must be submitted with all required documentation to the Grants Management Branch, Division of Acquisition and Grants Operations, Twinbrook Building, Suite 100, 12300 Twinbrook Parkway, Rockville, Maryland 20852, by close of business June 2, 1995.

Applications shall be considered as meeting the deadline if they are either: (1) Received on or before the deadline with hand carried applications received by close of business 5 p.m.; or (2) postmarked on or before the deadline date and received in time to be reviewed along with all other timely applications. A legibly dated receipt from a commercial carrier or the U.S. Postal Service will be accepted in lieu of a postmark. Private metered postmarks will not be accepted as proof of timely mailing. Late applications not accepted for processing will be returned to the applicant and will not be considered for funding.

Additional Dates

- 1. Application Review: July 13, 1995.
- 2. Applicants Notified of Results (approved, approved unfunded, or disapproved): August 1, 1995.
- 3. Anticipated Start Date: September 1, 1995.

FOR FURTHER INFORMATION CONTACT:

For program information, contact Ms. Rosh M. Foley, Chief, Scholarship Branch, Division of Health Professions Recruitment and Training, Indian Health Service, Twinbrook Building, 12300 Twinbrook Parkway, Suite 100A, Rockville, Maryland 20852, (301) 443-6197. For grants application and business management information, contact M. Kay Carpenter, Grants Management Officer, Division of Acquisition and Grants Operations, Indian Health Service, Twinbrook Building, 12300 Twinbrook Parkway, Suite 100, Rockville, Maryland 20852, (301) 443-5204. (The telephone numbers are not toll-free numbers.) SUPPLEMENTARY INFORMATION: This announcement provides information on the general program purpose, eligibility and priority, fields of health care considered for support, required affiliation, fund availability and period of support, and application procedures for FY 1995.

A. General Program Purpose

The purpose of the INMED program is to augment the number of Indian health professionals serving Indians by encouraging Indians to enter the health professions and removing the multiple barriers to their entrance into the IHS and private practice among Indians.

B. Eligibility and Priority

Public and nonprofit private colleges and universities with medical and other allied health programs are eligible. Nursing programs are not eligible under this announcement since the IHS currently funds the Nursing Recruitment grant program. The existing INMED grant program at the University of North Dakota has as its target population Indian tribes primarily within the States of North Dakota, South Dakota, Nebraska, Wyoming and Montana. A college or university applying under this announcement must propose to conduct its program among Indian tribes in States not currently served by the University of North Dakota INMED program.

C. Program Objectives

Each proposal must address the following five objectives to be considered for funding:

1. Provides outreach and recruitment for health professions to Indian communities including elementary and secondary schools and community colleges located on Indian reservations which will be served by the program.

2. Incorporates a program advisory board comprised of representatives from the tribes and communities which will be served by the program.

3. Provides summer preparatory programs for Indian students who need enrichment in the subjects of math and science in order to pursue training in the health professions.

4. Provides tutoring, counseling and support to students who are enrolled in a health career program of study at the respective college or university.

5. To the maximum extent feasible, employs qualified Indians into the program.

D. Fields of Health Care Considered for Support

The grant program must be developed to locate and recruit students with educational potential in a variety of health care fields. Primary recruitment efforts must be in the field of medicine with secondary efforts in other allied health fields such as pharmacy, dentistry, medical technology, X-ray technology, etc. The field of nursing is excluded since the IHS does fund the IHS Nursing Recruitment grant program.

E. Required Affiliations

The grant applicant must submit official documentation indicating a tribe's cooperation with and support of the program within the schools on its reservation and its willingness to have a tribal representative serving on the program advisory board. Documentation must be in the form prescribed by the tribe's governing body, i.e., letter of support or tribal resolution. Documentation must be submitted from every tribe involved in the grant program.

F. Fund Availability and Period of Support

It is anticipated that approximately \$200,000 will be available for one award. The anticipated start date of the grant will be September 1, 1995, in order to begin recruitment for the 1995–1996 academic year. Projects will be awarded for a budget term of 12 months, with a maximum project period of up to three (3) years. Grant funding levels include both direct and indirect costs. Funding of succeeding years will be based on the FY 1995 level, continuing need for the program, satisfactory performance, and the availability of appropriations in those years.

G. Application Process

An IHS Grant Application Kit, including the required PHS 5161–1 (Rev. 7/92) (OMB Approval No. 0937–0189) and the U.S. Government Standard forms (SF–424, SF–424A and SF–424B), may be obtained from the Grants Management Branch, Division of Acquisition and Grants Operations, Indian Health Service, Twinbrook Parkway, Suite 100, Rockville, Maryland 20852, telephone (301) 443–5204. (This is not a toll free number.)

H. Grant Application Requirements

All applications must be single-spaced, typewritten, and consecutively numbered pages using black type not smaller than 12 characters per one inch, with conventional one inch border margins, on only one side of standard size 8½ x 11 paper that can be photocopied. The application narrative (not including abstract, tribal resolutions or letters of support, standard forms, table of contents or the appendix) must not exceed 15 typed pages as described above. All applications must include the following in the order presented:

- —Standard Form 424, Application for Federal Assistance
- —Standard Form 424A, Budget Information—Non-Construction Programs, (Pages 1 and 2)

- —Standard Form 424B, Assurances— Non-Construction Programs (front and back)
- —Certifications, PHS 5161–1 (pages 17–18)
- -Checklist, PHS 5161-1 (pages 23-24)
- —Project Abstract (one page)
- —Table of Contents
- —Program Narrative to include:
- —Introduction and Potential Effectiveness of Project
- —Project Administration
- -Acessibility to Target Population
- Relationship of Objectives to Manpower Deficiencies
- -Project Budget
- —Appendix to include:
- —Tribal Resolution(s) or Letters of Support
- —Resumes (Curriculum Vitae) of key staff
- -Position descriptions for key staff
- -Organizational chart
- -Workplan format
- —Completed IHS Application Checklist
- —Application Receipt Card, PHS 3038– 1, Rev. 5–90

I. Application Instructions

The following instructions for preparing the application narrative also constitute the standards (criteria or basis for evaluation) for reviewing and scoring the application. Weights assigned each section are noted in parenthesis.

Abstract—An abstract may not exceed one typewritten page.

The abstract should clearly present the application in summary form, from a "who-what-when-where-how-cost" point of view so that reviewers see how the multiple parts of the application fit together to form a coherent whole.

Table of Contents—Provide a one page typewritten table of contents.

Narrative

- 1. Introduction and Potential Effectiveness of Project (30 Pts.)
- a. Describe your legal status and organization.
- b. State specific objectives of the project, which are measurable in terms of being quantified, significant to the needs of Indian people, logical, complete and consistent with the purpose of section 114.
- c. Describe briefly what the project intends to accomplish. Identify the expected results, benefits, and outcomes or products to be derived from each objective of the project.
- d. Provide a project specific workplan (milestone chart) which lists each objective, the tasks to be conducted in order to reach the objective, and the timeframe needed to accomplish each

- task. Timeframes should be projected in a realistic manner to assure that the scope of work can be completed within each budget period. (A workplan format is provided.)
- e. In the case of proposed projects for identification of Indians with a potential for education or training in the health professions, include a method for assessing the potential of interested Indians for undertaking necessary education or training in such health professions.
- f. State clearly the criteria by which the project's progress will be evaluated and by which the success of the project will be determined.
- g. Explain the methodology that will be used to determine if the needs, goals, and objectives identified and discussed in the application are being met and if the results and benefits identified are being achieved.
- h. Identify who will perform the evaluation and when.

2. Project Administration (20 Pts.)

- a. Provide an organizational chart and describe the administrative, managerial and organizational arrangement and the facilities and resources to be utilized to conduct the proposed project (include in appendix).
- b. Provide the name and qualifications of the project director or other individuals responsible for the conduct of the project; the qualifications of the principal staff carrying out the project; and a description of the manner in which the application's staff is or will be organized and supervised to carry out the proposed project. Include biographical sketches of key personnel (or job descriptions if the position is vacant) (include in appendix).
- c. Describe any prior experience in administering similar projects.
- d. Discuss the commitment of the organization, i.e., although not required, the level of non-Federal support. List the intended financial participation, if any, of the applicant in the proposed project specifying the type of contributions such as cash or services, loans of full or part-time staff, equipment, space, materials or facilities or other contributions.
- 3. Accessibility to Target Population (20 Pts.)
- a. Describe the current and proposed participation of Indians (if any) in your organization.
- b. Identify the target Indian population to be served by your proposed project and the relationship of your organization to that population.
- c. Describe the methodology to be used to access the target population.

- 4. Relationship of Objectives to Manpower Deficiencies (20 Pts.)
- a. Provide data and supporting documentation to substantiate need for recruitment.
- b. Indicate the number of potential Indian students to be contacted and recruited as well as potential cost per student recruited. Those projects that have the potential to serve a greater number of Indians will be given first consideration.

5. Project Budget (10 Pts.)

- a. Clearly define the budget. Provide a justification and detailed breakdown of the funding by category for the first year of the project. Information on the project director and project staff should include salaries and percentage of time assigned to the grant. List equipment purchases necessary for the conduct of the project.
- b. The available funding level of \$200,000 is inclusive of both direct and indirect costs. Because this project is for a training grant, the Department of Health and Human Services' policy limiting reimbursement of indirect cost to the lesser of the applicant's actual indirect costs or 8 percent of total direct costs (exclusive of tuition and related fees and expenditures for equipment) is applicable. This limitation applies to all institutions of higher education other than agencies of State and local government.
- c. The applicant may include as a direct cost tuition and student support costs related only to the summer preparatory program. Tuition and stipends for regular sessions are not allowable costs of the grant; however, students recruited through the INMED program may apply for funding from the IHS Scholarship Programs.
- d. Projects requiring a second and third year must include a program narrative and categorical budget and justification for each additional year of funding requested (this is not considered part of the 15-page narrative).

Appendix—to include:

- a. Tribal Resolution(s) or Letters of Support
- b. Resumes (Curriculum Vitae) of key staff
 - c. Position descriptions for key staff
 - d. Organizational chart
 - e. Workplan format
- f. Completed IHS Application Checklist
- g. Application Receipt Card, PHS 3038– 1, Rev. 5–90

J. Reporting

1. Progress Report—Program progress reports may be required quarterly or

semi-annually. These reports will include a brief description of a comparison of actual accomplishments to the goals established for the period, reasons for slippage and other pertinent information as required. A final report is due 90 days after expiration of the budget/project period.

2. Financial Status Report—Quarterly or semiannually financial status reports will be submitted 30 days after the end of the quarter or half year. Final financial status reports are due 90 days after expiration of the budget/project period. Standard Form 269 (long form) will be used for financial reporting.

K. Grant Administration Requirements

Grants are administered in accordance with the following documents:

- 1. 45 CFR part 92, HHH, Uniform Administrative Requirements for grants and Cooperative Agreements to State and Local Governments or 45 CFR part 74, Administration of Grants,
- 2. PHS Grants Policy Statement, and 3. OMB Circular A-21, Cost
- 3. OMB Circular A–21, Cost Principles for Educational Institutions.

L. Objective Review Process

Applications meeting eligibility requirements that are complete, responsive, and conform to this program announcement will be reviewed by an Objective Review Committee (ORC) in accordance with IHS objective review procedures. The objective review process ensures a nationwide competition for limited funding. The ORC will be comprised of IHS (40% or less) and other federal or nonfederal individuals (60% or more) with appropriate expertise. The ORC will review each application against established criteria. Based upon the evaluation criteria, the reviewers will assign a numerical score to each application, which will be used in making the final funding decision. Approved applications scoring less than 60 points will not be considered for funding.

M. Results of the Review

The results of the objective review are forwarded to the Associate Director, Office of Human Resources (OHR), for final review and approval. The Associate Director, OHR, will also consider the recommendations from the Division of Health Professions

Recruitment and Training and Grants Management Branch. Applicants are notified in writing on or about August 1, 1995. A Notice of Grant Award will be issued to successful applicants. Unsuccessful applicants are notified in writing of disapproval. A brief explanation of the reasons the application was not approved is provided along with the name of the IHS official to contact if more information is desired.

Dated: April 12, 1995.

Michael H. Trujillo,

Assistant Surgeon General, Director. [FR Doc. 95–9759 Filed 4–19–95; 8:45 am] BILLING CODE 4160–16–M

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

Office of Administration

[Docket No. N-95-3893; FR-3879-N-02]

Notice of Submission of Proposed Information Collection to OMB

AGENCY: Office of Administration, HUD. **ACTION:** Notice.

SUMMARY: The proposed information collection requirement described below has been submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments must be received within thirty (30) days from the date of this Notice. Comments should refer to the proposal by name and should be sent to: Joseph F. Lackey, Jr., OMB Desk Officer, Office of Management and Budget, New Executive Office Building, Washington, DC 20503.

FOR FURTHER INFORMATION CONTACT: Kay F. Weaver, Reports Management Officer, Department of Housing and Urban Development, 451 7th Street, Southwest, Washington, DC 20410, telephone (202) 708–0050. This is not a toll-free number. Copies of the proposed forms and other available documents submitted to OMB may be obtained from Ms. Weaver.

SUPPLEMENTARY INFORMATION: The Department has submitted the proposal for the collection of information, as described below, to OMB for review, as required by the Paperwork Reduction Act (44 U.S.C. Chapter 35).

The Notice lists the following information: (1) The title of the information collection proposal; (2) the office of the agency to collect the information; (3) the description of the need for the information and its proposed use; (4) the agency form number, if applicable; (5) what members of the public will be affected by the proposal; (6) an estimate of the total number of hours needed to prepare the information submission including number of respondents, frequency of response, and hours of response; (7) whether the proposal is new or an extension, reinstatement, or revision of an information collection requirement; and (8) the names and telephone numbers of an agency official familiar with the proposal and of the OMB Desk Officer for the Department.

Authority: Section 3507 of the Paperwork Reduction Act, 44 U.S.C. 3507; Section 7(d) of the Department of Housing and Urban Development Act, 42 U.S.C. 3535(d).

Dated: April 14, 1995.

David S. Cristy,

Acting Director, Information Resources Management Policy and Management Division.

Notice of Submission of Proposed Information Collection to OMB

Proposal: Emergency Shelter Grants Program Indian Set-Aside Application (FR–3879).

Office: Public and Indian Housing.

Description of the Need for the
Information and Its Proposed Use: This
program provides competitive grants to
Indian tribes and Alaskan Native
villages to help improve the quality of
existing emergency shelters for the
homeless, make available additional
emergency shelters, meet the cost of
operating emergency shelters, provide
essential social services to homeless
individuals, and help prevent
homelessness.

Form Number: HUD-40114. Respondents: State, Local or Tribal Governments and Not-For-Profit Institutions

Reporting Burden:

	Number of re- spondents	×	Frequency of response	×	Hours per response	=	Burden hours
Application	40		1		32		1,280